Name in Full: James C. Berry.

Certificate of Death

Died at Town: New Hambleton County: Talbot MARYLAND

Date 189 8 Month: Oct. Day: 2! | Age Y. 86 M. 5 D. 24 | Native of: Maryland | Occupation: Farmer.

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ | ~~Number of children living~~

~~Husband of Wife~~

Father's Name: Jeremiah Berry

Mother's Name: Not Known.

Cause of Death: Primary: Chronic Diarrhea

How long sick: about 6 Months

Immediate: Exhaustion 83

~~Accident Suicide Homicide~~

Reported by: James S. Chaplain M.D.

Address: Trappe Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65966

Name in Full

Certificate of Death

Fatima Burns

Town: St. Michaels

County: Talbot

Died at ... MARYLAND

Date 1898 Month: Oct Day: 25

Age: Y. 73 M. 2 D. 6

Native of: Maryland

Occupation: Housekeeper

~~Male~~ Female

White ~~Colored~~

Married ~~Single~~

Widow ~~Widower~~

~~Divorced~~

Number of children living: Six

~~Husband~~ Wife of Wm. A. Burns

Father's Name: Thomas Cockey

Mother's Name: Susan Cockey

Cause of Death: Primary: Valvular Heart Disease 57 — How long sick: 18 months

Immediate: Asthenia

~~Accident~~ Suicide, ~~Homicide~~

Reported by: A. B. Lasocki M.D.

Address: St Michaels. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full

Certificate of Death

Elizabeth Cahall

Died at Town: Oxford County: Talbot State of: MARYLAND

Date 1898 Month: 10th Day: 20 | Age Y. 99 M. 3 D. 18 | Native of Md. | Occupation Home Keeper

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | Widow ~~Widower~~ | ~~Divorced~~ | Number of children living 3

~~Husband~~ Wife of William Cahall

Father's Name William Pratt | Mother's Name Mollie Pratt

Cause of Death: Primary Old age 44 | How long sick 1 week.

Immediate Paralysis | Accident, Suicide, Homicide

Reported by A. Kinnamon Son in law

Address Oxford Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr. No Physician in attendance

of

Finished.

Seen by Coroner

of

Information contained in this certificate received from W. E. Newman M.D.

of Elkton Md

Name in Full

Certificate of Death

Mary Lavinia Chaplain

Died at Town: Easton County: Talbot MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
10	23	3				

Date 1898 | Age

~~Male~~ / Female

White / ~~Colored~~

~~Married~~ / Single

~~Widow~~ / ~~Widower~~

~~Divorced~~

~~Number of children living~~

Husband of
Wife

Father's Name

Mother's Name

Cause of Death: Primary 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Easton Ledger 10-2

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

J. C. Tuttle, Royal Oak Dec. 30

Dr. Ed. Tuttle Dec. 21

Name in Full

Certificate of Death

Millian Coffin

Town

County

Talbot

Died at

MARYLAND

Month	Day		Y.	M.	D.	Native of	Occupation
Date 1895 10	12	Age	2,	2	—	Md	—

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living

Husband of Wife

Father's Name Isaac Coffin

Mother's Name Margaret Coffin

Cause of Death: Primary Dysentery 84 — How long sick 5 days

Immediate Convulsions

~~Accident Suicide Homicide~~

Reported by Julius A. Johnson M.D.

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, BOSTON

Name in Full Bessie Coulby Certificate of Death Coulby

Died at Town Easton Md. County Talbot MARYLAND

Date 1898 Month 10- Day 5th | Age Y. 12- M. 0- D. 0 | Native of Md | Occupation —

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ Single | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of ~~children~~ living

~~Husband~~ Wife of

Father's Name Robt. M. Coulby | Mother's Name Coulby

Cause of Death: Primary Typhoid fever | How long sick 3 weeks

Immediate Exhaustion | ~~Accident~~, ~~Suicide~~, Homicide

Reported by Thos. A Carroll MD

Address Easton Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65988

Name in Full

Certificate of Death

Mary Elizabeth Covington

Town: Tilghman

County: Talbot

Died at

MARYLAND

Date 1898 Month: Oct. Day: 28

Age Y.: 53 M.: 6 D.: 16

Native of: Md.

Occupation: Housewife

~~Male~~ / Female

White / ~~Colored~~

Married / ~~Single~~

~~Widow~~ / Widower

~~Divorced~~

~~Number of children living~~

~~Husband~~ / Wife of Wm R Covington

Father's Name: Cummings

Mother's Name:

Cause of Death — Primary: Consumption 229

How long sick: 5 mos.

Immediate

~~Accident, Suicide, Homicide~~

Reported by W. S. Chaires, M.D.

Address Tilghman. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068

Name in Full — Certificate of Death

William C. Debeel

Died at — Town: St. Michaels — County: Talbot — MARYLAND

Date 189 8 — Month: Oct. — Day: 3 — Age: Y. 83 M. — D. — Native of: Md. — Occupation: Gilder & Painter

Male / ~~Female~~ — White / ~~Colored~~ — Married / ~~Single~~ — ~~Widow~~ / Widower — ~~Divorced~~ — Number of children living: One

Husband / ~~Wife~~ of: Mrs. Mary Keys

Father's Name: Cornelius — Mother's Name: Agnes Mary Duncan

Cause of Death — Primary: Uremic Poison — 97 — How long sick: 3 Days

Immediate

Accident, Suicide, Homicide

Reported by: R. Woodson

Address: St Michaels Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968

Name in Full — Certificate of Death

Mrs. Boyle Henkin

Town — County

Died at Near Wye Mills Talbot MARYLAND

Month Day — Y. M. D. — Native of — Occupation

Date 189 Oct 5 Age 72 Md Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living Ten

~~Husband~~ Wife of Mrs. B. Henkin

Father's Name — Mother's Name

Cause of Death: Primary — Pneumonia 2 2 9 — How long sick One year

Immediate — Phthisis — Accident, Suicide, Homicide

Reported by Howard R. Hopkins

Address Wye Mills Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU FORM

Name in Full — Certificate of Death

John Carson Abbey

Town: Near Easton — County: Talbot — MARYLAND

Died

Date 189 8	Month	Day	Age	Y.	M.	D.	Native of	Occupation
	Oct	9th		7	7	23	Penn	Farmer

Male — ~~Female~~ — White — ~~Colored~~ — ~~Married~~ — ~~Single~~ — ~~Widowed~~ — Widower — ~~Divorced~~

Number of children living 3

Husband / Wife of ~ ~

Father's Name: Don't Know

Mother's Name: Don't Know

Cause of Death — Primary: Apoplexy — 42 — How long sick 10 days

Immediate: ~ ~ ~ ~

~~Accident, Suicide, Homicide~~

Reported by J. M. H. Bateman MD

Address Easton — Talbot Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Name in Full

Ellarine Frampton

Certificate of Death

Died at Town: Near Royal Oak County: Talbot Co MARYLAND

Date 1898 Month: Oct Day: 8 — | Age Y. 35 M. D. | Native of: md | Occupation: Lady

Male / Female — White / Colored — Married / Single — Widow / Widower — Divorced — Number of children living

Husband / Wife of

Father's Name: Richd B. Frampton — Mother's Name: Ellen Frampton

Cause of Death — Primary: Insanity — 46 — How long sick

Immediate: Exhaustion — Accident, Suicide, Homicide

Reported by: Saml C. Snyder Md

Address: Royal Oak Md

Must be signed by physician, if any In attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Name in Full

Certificate of Death

Martin Charles Haddaway

Died at Town: Lily Lyman County: Talbot MARYLAND

Date 189 8 Month: 10 Day: 17 Age: Y. 1 M. — D. — Native of: Lily Lyman Occupation: Baby

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number ~~of children living~~

Husband / Wife of

Father's Name: Ward Haddaway Mother's Name: Maggie Haddaway

Cause of Death — Primary: Pleuro-Colitis 83 How long sick: 6 weeks

Immediate: Asthenia ~~Accident, Suicide, Homicide~~

Reported by: S. Kennedy Wilson M.D.

Address: Lily Lyman Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65968

Name in Full — Certificate of Death

Ruth — Hughes Hughes

Died at Town: Royal Oak — County: Talbot — MARYLAND

Date 1895 Month: Oct Day: 6. | Age Y. M. D.: 1 Year | Native of: Md | Occupation:

Male / Female — White / Colored — Married / Single — Widow / Widower — Divorced / Number of children living

Husband / Wife of

Father's Name: Wm Hughes

Mother's Name: Sarah Hughes

Cause of Death — Primary: Enteric Colitis 8 2 — How long sick: 2 mo

Immediate: Convulsions

Accident, Suicide, Homicide

Reported by: Saml B Tilghman

Address: Talbot Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78706

Name in Full

Certificate of Death

George T. Jefferson

Died at St Michaels (Town) Talbot (County) MARYLAND

Date 189 8 Month Oct Day 8. Age Y. 0 M. 2 D. 15 | Native of | Occupation

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name George W. Jefferson

Mother's Name

Cause of Death: Primary Gastritis 2 days | How long sick

Immediate | Accident, Suicide, Homicide

Reported by Coroner. St Michaels Oct 15

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65958

Rev. G. W. Burke (Mrs.)

P. C. I 26

Dr. R. A. Dodson

Name in Full

Certificate of Death

Mary Emily Jefferson

Died at St. Michaels (Town) Talbot (County) MARYLAND

Date 1898 Month Oct. Day 4 | Age Y. 34 M. 5 D. | Native of St Michaels | Occupation Housekeeper

~~Male~~ Female | White Colored | ~~Single~~ Married Widow Widower | Divorced | Number of children living one

~~Husband~~ Wife of Mr. Wesley W. Jefferson

Father's Name John Marshall | Mother's Name Caroline Marshall

Cause of Death: Primary Uraemic Eclampsia — 83 | How long sick 3 weeks

Immediate | Accident, Suicide, Homicide

Reported by R. Woodson

Address St Michaels Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65068

Name in Full Alice W. Lamin — Certificate of Death

Died at Town Cath — County Kent — MARYLAND

Date 189 — Month 10 — Day 30 — Age Y. 53 M. — D. — Native of Md — Occupation Housewife

Male — White — ~~Married~~ — ~~Widow~~ — ~~Divorced~~

~~Female~~ — ~~Colored~~ — ~~Single~~ — Widower — Number of children living Two

Husband of Wife Alice Lamin

Father's Name Robt. T. Lamin — Mother's Name Elizabeth Hall

Cause of Death — Primary ——— . 145 d — How long sick ———

Immediate R. R. Accident — Accident, ~~Suicide, Homicide~~

Reported by J. A Cannon M.d

Address Cath Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Edmund T. Linak — Certificate of Death

Died at Town: Easton County: Talbot — MARYLAND

Date 189 Month: 10 Day: 20 | Age Y. 61 M. — D. — | Native of Md | Occupation Sea Captain

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ ~~Widowed~~ ~~Widower~~ ~~Divorced~~

Number of children living 6

Husband ~~Wife~~ of Annie M. Linak

Father's Name Robert Linak — Mother's Name Annie Vickers

Cause of Death: Primary ——— . 145d.

Immediate R. R. Accident — How long sick ———

Accident, ~~Suicide, Homicide~~

Reported by Thos. A Conner, MD

Address Easton Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 68968

Name in Full

Certificate of Death

Emma Leonard,

Town: Dunbarton Mills, County: Talbot

Died at Dunbarton Mills, Talbot MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
Oct	4	19	yrs		Talbot	Teacher

Date 1898

~~Male~~ Female

White ~~Colored~~

~~Married~~ Single

~~Widow~~ ~~Widower~~

~~Divorced~~

Number of children ~~living~~

~~Husband~~ ~~of~~ ~~Wife~~

Father's Name C. R. Leonard

Mother's Name Mary Dodd

Cause of Death: Primary — Measles followed by tuberculosis — How long sick 3 mo

Immediate — Pneumonia — Accident, Suicide, Homicide

Reported by Saml C Tribbitt M.D.

Address Royal Oak Md

OVER

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79705

Attended by Dr. Saml C. Tibbe

of Royal Oak Md

The undertaker was Jno Mason & Son

of Easton Md

Information contained in this certificate received from Self

of

Name in Full — Certificate of Death

Thomas G. Mullin

Died at — Town: Talbot — County: — MARYLAND

Date 1898 — Month: Oct — Day: 31st — Age: Y. 59 M. 7 D. — Native of: Talbot Co — Occupation: Mill hand

Male — ~~White~~ — Married — ~~Widow~~ — ~~Divorced~~

~~Female~~ — Colored — ~~Single~~ — ~~Widower~~ — Number of children living five

Husband / Wife of Annie G. Mullin

Father's Name: John Mullin — Mother's Name: Eliza Mullen

Cause of Death — Primary: Paralysis & Bright's Disease 97 — How long sick: Thirteen months

Immediate: Oedema of the lungs — ~~Accident, Suicide, Homicide~~

Reported by: Julius A. Johnson M.D.

Address: Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Mrs Jennie Parks

Certificate of Death

Died at Town Near Wye Mills County Talbot MARYLAND

Date 1894 Month Oct Day 10 Age Y. 28 M. D. Native of Virginia Occupation housewife

~~Male~~ Female ~~White~~ Colored Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living ~~—~~

Husband / Wife of Walter Parks

Father's Name

Mother's Name

Cause of Death: Primary Phthisis 22a How long sick one year

Immediate Gradual decline Accident, Suicide, Homicide

Reported by Howard E Hopkins

Address Wye Mills Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. STORE

Name in Full — Elizabeth J. Satterfield — Certificate of Death

Died at — Town: Easton — County: Talbot — MARYLAND

Date 189 8 — Month Day: Oct. 17 — Age: Y. M. D. — Native of — Occupation: Domestic Duties

~~Male~~ Female — White — ~~Colored~~ — Married — ~~Single~~ — Widow — ~~Widower~~ — Divorced — ~~Number of children living~~

~~Husband~~ Wife of James D. Satterfield

Father's Name: Clough — Mother's Name:

Cause of Death — Primary: Fatty degeneration of Heart 5 7 — How long sick: 3 weeks

Immediate: Heart failure — Accident, Suicide, Homicide

Reported by: F. B. Merrill

Address: Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Samuel E. Shannahan

Died at Town: Easton County: Talbot MARYLAND

Date 1898 Month: Oct Day: 22 | Age Y.: 79. M.: — D.: 29 | Native of: Md. | Occupation: Retired

Male ~~Female~~ | White ~~Colored~~ | Married ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ | Number of children living 2

Husband ~~Wife~~ of Margaret E. Shannahan

Father's Name Isaac Shannahan | Mother's Name Rachel Cheezum

Cause of Death: Primary Dilatation of Heart | How long sick 6 months

Immediate Heart Failure 67 | ~~Accident, Suicide, Homicide~~

Reported by Joseph L. Garrison

Address Easton, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65168

Name in Full — Certificate of Death

Thos. J. Spencer

Town — County

Died at St Michaels — Talbot — MARYLAND

Date 1898 Month Oct Day 18 — Age Y 68 M 11 D 28 — Native of St Michaels — Occupation Carpenter

Male ~~Female~~ — White ~~Colored~~ — Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ — Number of children living three

Husband / Wife of Mary E. A. Spencer

Father's Name Thos. H. Spencer — Mother's Name Maria Spencer

Cause of Death — Primary: Chronic Pericarditis (inducing dropsy) — How long sick one year

Immediate: Asthenia 5-5-

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by A. B. Glascock M.D

Address St Michaels, Talbot Co,

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, FORM